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APPROVED BY:	SUPERSEDES	ORIGINAL ISSUE DATE	DISTRIBUTION
Robin Koy Ph.). Acting Director	308.01 02/24/2014	02/01/1999	LEVEL(S) <b>1</b>

#### **PURPOSE**

- 1.1 To establish a policy and procedures to facilitate proper handling and reporting of potential acts or threats of violence by Los Angeles County Department of Mental Health (LACDMH/Department) employees or others.
- 1.2 To establish procedures for responding to and prompt reporting of security incidents occurring at LACDMH facilities or directly affecting departmental consumers, employees, visitors, or County property.
- 1.3 To establish a Department-wide protocol, based on the California Occupational Safety and Health Administration (Cal/OSHA) guidelines (Authority 1) that:
  - 1.3.1 Promotes security/safety;
  - 1.3.2 Prevents violence in the workplace; and
  - 1.3.3 Focuses on maintaining the safety of all staff, consumers, and visitors. This includes educating and training employees to look for problematic behavior or indicators that may lead to workplace violence.

#### **POLICY**

- 2.1 LACDMH is committed to ensuring that the Departmental Injury and Illness Prevention Plan (IIPP) and other policies and procedures involving workplace safety and security are clearly communicated by supervisors and managers to all employees (Reference 1).
  - 2.1.1 Communication of safety, health, and security concerns between employees, supervisors, and managers shall be posted or distributed as outlined in the LACDMH IIPP Manual (Reference 1),



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Communication section. This includes reporting instructions to inform management about workplace security hazards. LACDMH employees who become aware of any event which compromises security or safety of a patient, visitor, employee, or County property shall immediately report it to their supervisors.

- 2.1.2 LACDMH Departmental Health and Safety Officer (DHSO) and/or LACDMH Security Coordinator will provide training programs designed to address specific aspects of workplace security such as workplace violence prevention (including non-violent conflict resolution methods), stress reduction/management, human relations skills, managers'/supervisors' style of motivation/management, etc.
- 2.1.3 Supervisors and managers shall also provide training and/or consultation with the Department of Mental Health-Human Resources Bureau (DMH-HRB) Performance Management Unit about corrective action for employees who fail to comply with work practices designed to ensure workplace security.
- 2.1.4 Employees who fail to comply with workplace security practices, directives, and policies and procedures may be subject to administrative action consistent with the Los Angeles County Department of Human Resources Countywide Discipline Guidelines (CDG) (Reference 2).
- 2.2 Employees, including supervisors and managers, shall comply with work practices that are designed to make the workplace more secure and shall not engage in verbal threats or physical actions which create a security hazard for others in the workplace. Refer to LACDMH Policy No. 605.04, Violence and Threats of Violence by Department of Mental Health Employees (Reference 3) for definitions of Violent and Violent Acts.
- 2.3 A Security Incident Report (SIR) shall be completed and submitted for physical or verbal threats of violence against employees on LACDMH premises (Attachment 1).



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- 2.3.1 The SIR has been developed by the Security Operations Unit (SOU) to document and report physical or verbal threats of violence against consumers, employees, and/or visitors on LACDMH premises during the course of normal business. Managers, supervisors, and/or staff must document physical or verbal threats and violence on the SIR (Attachment 1).
- 2.4 Each facility, including Headquarters offices, shall designate and maintain a Clinic Based/Facility Safety Officer to manage and facilitate security related issues. A Departmental Health and Safety Committee shall meet monthly to support and implement Clinic Based/Facility Safety Officer oversight responsibilities.
  - 2.4.1 The Clinic Based/Facility Safety Officer and Safety Committee are responsible for:
    - 2.4.1.1 Reviewing the results of periodic scheduled workplace security inspections and investigations of workplace violence and making suggestions to management for the prevention of future incidents.
    - 2.4.1.2 Reviewing threats and incidents and submitting recommendations to management to assist in the evaluation, training, and counseling of employees.
- 2.5 Each facility will develop written Building Security Procedures for visitors, requiring all employees, supervisors, and managers to wear their LACDMH Identification (ID) badges at all times when on County property, consistent with LACDMH Policy 609.04, Identification Card Usage, Replacement, and Collection (Reference 4).
  - 2.5.1 Visitor must enter through the front lobby, complete the information specified in a Visitor Sign-In Log, attach a Visitor badge to his/her clothing above the waistline, and wait to be escorted into other areas by an authorized employee.



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- 2.5.1.1 Friends or relatives of staff will not be permitted on County or County-leased premises without the consent/approval of the Bureau/Division/Clinic Manager.
- 2.5.2 Visitor must be escorted by an employee who will be responsible for escorting each visitor to the front lobby when the visit is finished. The visitor can be escorted by the employee with whom they have an appointment.
- 2.6 Management at each facility shall be responsible for handling employees' acts or threats of violence (as outlined in LACDMH Policy No. 605.04, Violence and Threats of Violence by Department of Mental Health Employees [Reference 3]). The Manager or staff from the Performance Management Unit will notify the DHSO of any employees who have been terminated, suspended, or not allowed into a facility due to threats, violent acts, etc. The DHSO will notify the LACDMH Security Coordinator who will then notify the Sheriff Security Officer and/or Contract Security Guards at the facility, provide a photo ID of the employee, and instruct them that if such an individual is seen on the grounds of the facility or attempts to enter the facility, they shall immediately:
  - 2.6.1 Prohibit the individual from entering the workplace;
  - 2.6.2 Call for police backup to escort the individual from the facility; and
  - 2.6.3 Notify the manager and LACDMH Security Coordinator that the individual attempted to enter the workplace.
- 2.7 The Clinic Based/Facility Safety Officer serves as the central point of his/her assigned facility for submission of safety/security reports and is responsible for computation and maintenance of data related to such reports. Management reports are provided to Executive Management Team on a quarterly basis. The Clinic Based/Facility Safety Officer, the DHSO, Security Operations Unit (SOU), and Chief Executive Office can provide support and intervention and are available to answer any procedural questions.



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#### **PROCEDURE**

- 3.1 A SIR shall be completed whenever, but not limited to, for any of the following occurrences at a LACDMH facility. In addition, a call shall be placed to the DMH-HRB, Performance Management Unit, to inform them of the incident.
  - 3.1.1 Verbally abusive or threatening language or behavior toward another employee, a supervisor, or any other person on LACDMH premises;
  - 3.1.2 Unauthorized entrance to County premises during non-scheduled working hours or entrance into unauthorized areas during regular working hours;
  - 3.1.3 Any verbal threats or physical acts of arson, robbery, rape, vandalism, etc.;
  - 3.1.4 Any incident that places on-duty County employees at risk of becoming a victim of violence and/or crime:
  - 3.1.5 Any incident on County property or that places County property at risk, including incidents which require action by law enforcement, Sheriff Security Officer, or contract security guard (whether they were summoned or not); and
  - 3.1.6 Any employee-related acts of violence specified in LACDMH Policy No. 605.04, Violence and Threats of Violence by Department of Mental Health Employees (Reference 3).
- 3.2 The SIR shall be completed by the person directly involved in the incident and manager or Clinic Based/Facility Safety Officer. The SIR shall be emailed to the Clinic Based/Facility Safety Officer, the DHSO, and SOU. A SIR must be submitted no later than the end of business on the day following the incident. In addition to completing a SIR as described in Section 3.1, a follow-up telephone call shall be made by the manager/designee to the Clinic Based/Facility Safety Officer to briefly describe the situation and begin necessary precautions.



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### 3.3 Threat Management

- 3.3.1 The manager shall perform the following to protect employees from threats or retaliation by <u>former</u> employees as discussed in Section 2.7:
  - 3.3.1.1 Notify DMH-HRB and fellow employees of a former employee's threats;
  - 3.3.1.2 Require any discharged employees to obtain special permission from management to return to the facility for any purpose, including provisions for terminated employees to follow up with the DMH-HRB regarding returning keys, ID badge, and final pay warrant per LACDMH Policy No. 560.01, County Property and Systems Access Clearance for Terminations and Interdepartmental Transfers (Reference 7).
  - 3.3.1.3 Call and report any acts or threats of violence made by discharged or <u>current</u> employees to:
    - The Clinic Based/Facility Safety Officer who will begin documentation which includes a log of events, notification, and any contacts initiated and maintained by the designated person at the facility;
    - The DHSO for assessment to determine if additional steps and notifications are needed and for record-keeping;
    - SOU staff for assistance in determining if the threat elements of Penal Code (PC) 422 (threats of violence), PC 646.9 (stalking), and PC 601 (felony trespassing) have been met (Reference 5); and
    - The DMH-HRB Performance Management Unit who will work with the manager with regard to corrective action in compliance with the CDG (Reference 2).
- 3.3.2 Threats by clients toward an employee: Staff shall report client threats to a manager/designee. The manager/designee shall carefully assess the client(s) to determine the nature and seriousness of the threats. The



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manager/designee is to determine all of the interventions necessary to ensure staff and client safety. The therapeutic nature of the services provided should be preserved to the extent possible.

### 3.3.2.1 The manager/designee shall:

- Ensure that the employee is notified of the threat;
- Immediately discuss the situation with all relevant parties to determine the seriousness of the threat:
- Consider the range of interventions that would, when possible, address the provision of therapeutic services and resolve the security concern;
- In situations where the manager/designee determines that the security concern cannot be adequately resolved through clinical intervention, notify security personnel, the Clinic Based/Facility Safety Officer, SOU, and the District Chief of the threat;
- Email the SIR to the DHSO and SOU as in Section 3.2;
- The DHSO, LACDMH Security Coordinator, and Clinic Based/Facility Safety Officer should also be contacted by phone to explain the situation; and
- In situations in which the threatening client is physically within the clinic, immediately contact security personnel and local law enforcement.
- 3.3.2.2 The DHSO, LACDMH Security Coordinator, and Clinic Based/Facility Safety Officer shall assist the manager in initiating a safety/security plan which shall include:
  - Offering an alternative worksite to the employee;
  - Taking extra security measures such as having security personnel escort the threatened employee and other concerned staff to and from their vehicles;



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- In consultation with the manager and/or District Chief, assigning a point person at the clinic for communications with the client;
- In consultation with the manager/and or District Chief, consider LACDMH Policy No. 312.01, Mutual and Unilateral Termination of Mental Health Services (Reference 6) and, if indicated, transfer the client to another clinician at the clinic or another clinic/agency in the Service Area or County;
- Consult with SOU staff for assistance in determining if the threat elements of Penal Code (PC) 422 (threats of violence), PC 646.9 (stalking) and PC 601 (felony trespassing) have been met (Reference 5);
- Consult with SOU staff and, in conjunction with the manager, assist the threatened employee in identifying his/her options which may include:
  - Filing a police report; and
  - ➤ If indicated by the nature of the threat and in conjunction with SOU, County Counsel, and the Crisis Management Team determining other legal options such as a temporary restraining order.
- Maintain documentation which includes a log of events, notification, and any contacts initiated and maintained by the designated person at the facility.
- 3.3.3 The clinic manager is responsible for contacting local police where deemed appropriate (e.g., for theft, police report is necessary to substantiate a request for replacement of stolen items).
- 3.3.4 Along with the SIR form, the following forms should be used as appropriate: Safety Intelligence Report, Accident/Incident Investigative Report (AIIR), Employer's Report of Occupational Injury or Illness, etc (Attachment 2).
- 3.3.5 Any violation by employees of any of the rules set forth in this policy, or



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other action(s) taken contrary to the LACDMH's best interest, will be sufficient grounds for corrective action in accordance with the CDG.

### <u>AUTHORITY</u> (HYPERLINKED)

Cal/OSHA Guidelines (available at <a href="http://www.dir.ca.gov/DOSH">http://www.dir.ca.gov/DOSH</a>)

### **ATTACHMENT** (HYPERLINKED)

- 1. Security Incident Report Form
- 2. Accidents/Incidents/Complaints Reporting Guide and Contact List

### **REFERENCE**

- 1. LACDMH Injury and Illness Prevention Plan Manual (Revised March 2015)
- 2. Los Angeles County Department of Human Resources Countywide Discipline Guidelines
- 3. LACDMH Policy No. 605.04, Violence and Threats of Violence by Department of Mental Health Employees
- 4. LACDMH Policy No. 609.04, Identification Card Usage, Replacement, and Collection
- 5. Penal Code (PC) 422 (threats of violence), PC 646.9 (stalking), and PC 601 (felony trespassing)
- 6. LACDMH Policy No. 312.01, Mutual and Unilateral Termination of Mental Health Services
- 7. LACDMH Policy No. 560.01, County Property and Systems Access Clearance for Terminations and Interdepartmental Transfers

### **RESPONSIBLE PARTY**

LACDMH Human Resources Bureau, Health and Safety Officer